# Individual submission to the Royal Commission into Victoria's Mental Health System

## **Introduction:**

1.	I am not officially a carer, I am a 20 year friend to
	have been involved but I am not recognised as an official carer. I would not hesitate
	to become carer if she wanted or needed that.
2.	The demands of the broken system have impacted services that ${\rm I}$ am reaching out to
	which have prevented me from having my needs. Services are overburdened and
	understaffed. Could the RC identify service gaps and address those gaps such as
	adequate funding.
3.	I am reporting to the Royal Commission (RC) the names of medical persons involved $$
	in the decision to place under an involuntary order, the result has been
	devastating for
4.	I have no doubt that sense of self has been damaged by the act of taking her
	freedom and authority from her.
5.	Detaining in the base of the b
	primary, secondary and tertiary level of life. Primary to secondary to me and
	other friends, and tertiary to society in general.
6.	Transferring from to a facility when she
	could attend as an outpatient is for and and Hospital to continue
	to harm her. like many vulnerable women need to be afforded greater
	protection. Could the RC make this recommendation?
7.	has had to find capacity to withstand the ignorance that embeds the
	actions of a medical system which needs urgently to change. The expression on
	face begging me to take her home torments me when it should torment
8.	On the <b>18 March 2019</b> I attended an appointment with to see her <b>GP</b>
	<b>Dr</b> I was included with exempla professionalism.
	On the same day I met (complex care nurse)
	was not professional and crossed the line when she visited at her home
	and proceeded to take over. I made clear to that was my

bench mark. Nurse is primary to the chain of events that have har	med
restricting her to having no voice.	
9. Can the Royal Commission make water tight a recommendation that	protects
vulnerable persons such as from having their lives turned upside of	lown by
interference rather than supportive constructive intervention?	
10.On the <b>18 March 2019</b> did not build community relationship with	:h
who was distressed and rang me about the pressure of having to let	
Hospital staff into her home. This is where Hospital failed to build	`human'
rapport/relationship with	
11. Hospital has not respected	
12.To incarcerate a person is major and <b>Dr</b> and Registrar <b>Dr</b> have	caused
mental and emotional torment by removing her from her home.	
13. To be there for my friend requires that I do not sugar coat the legal reality $\frac{1}{2}$	that has
beset as a result of what two Doctors have set in motion.	
14.I have no doubt that the Doctors involved could see on a	weekly
appointment and say and do everything that they say when doing their $lacksquare$	
rounds.	
15. and I were on the verge of organising age care services when	rudely
interfered. life continues to be intruded upon.	
16.Locking a person away when there are no grounds for doing so is abusive.	
17. has been locked in house for 3 months- and was admitted	to level
2 of the geriatric ward of Hospital on Wednesday the 20	March
2019 for what she believed was observation in preparation for a possible	second
operation. Instead of being treated as a voluntary inpatient, was held	against
her will for a geriatric assessment.	
18.At no stage was up front about this when she visited at h	er home
the previous week.	
19.A treatment misdiagnoses has occurred.	
20.From the first day at Hospital Hospital objected to being forced	to stay.
What she thought she was voluntarily agreeing to was not the case. This is	an area
that I would like the Royal Commission to explore further.	
21. How easy it was for Hospital to distort the truth when ha	d every
right to go home as a voluntary patient. To present as a risk of abscond	ding and

a risk to herself when not is for the Royal Commission to know case in more detail.

### **History:**

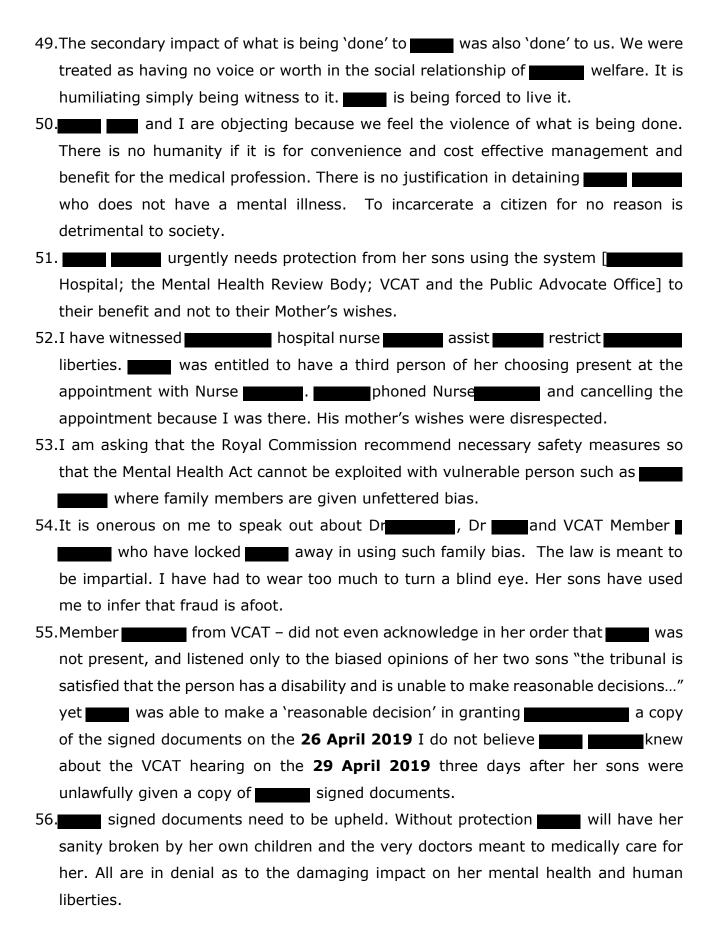


relationship for The nurse was friendly to me but not to

29	I believe how is being treated constitutes an insidious type of elder abuse. The
	more had her free will abused the more frightened, defensive and desperate
	became. was not safe to express her thoughts and feelings; and I know
	this because I too was not safe to voice my concerns.
30	was not related to as a voluntary patient and may as well have been in a
	straight-jacket.
31	was too well to be in the geriatric level of Hospital and it is this
	fact that remains incongruent with Doctors and nurses who are treating her. Is this
	the socio-line of our mental health system where persons are told that they are not
	ill enough to have mental health support even though suicidal and persons such as $% \left( 1\right) =\left( 1\right) \left( 1\right) +\left( 1\right) \left( 1\right) \left( 1\right) +\left( 1\right) \left( 1$
	who have at no stage sought mental health assistance are being forced
	to comply?
32	On Friday the <b>29 March 2019</b> left the premises of hospital to
	protect herself. To my understanding was crossing the road to catch the bus
	home when Hospital staff unlawfully detained and labelled her 'a harm to
	herself'. This is the escalating elder abuse as is not a harm to herself and
	should have been entitled to leave as a voluntary patient.  voiced her objection
	until punitive measures closed her down.
33	.This is the critical incident where everything thereafter has compounded the abuse
	of violating free will, freedom and authority.
34	.Currently is an involuntary inpatient under a treatment order. Nurse
	through the Hospital Admission Risk Program (HARP) got it wrong and has
	only instilled fear and caused harm to
35	.`Older people with complex and social needs' is being exploited in situation.
	Removing her from her home is the abhorrent complication that has not met
	social need. Nurse from HARP has acted irresponsibly with adverse
	consequences for
36	Locking in in its in its in its in its is not medical care. I would like to know if
	the doctors responsible have a reference point to being debased as $\hfill$ is. The
	assumption that 'mental health' can give licence to a person to mistreat another
	under the Mental Health Act is an area I would like the RC to redress.
37	On <b>31 March 2019</b> I visited at an and this is the occasion where
	adverse 'secondary' impact occurred. I was subjected to the abuse of nower by the

unit co-ordinator (surname unknown) calling a code black. See complaint to the **Mental Health Complaint Commission**.

- 38.I am asking that the Royal Commission on Mental Health address this type of elder's abuse where a 60, 70 and 80 year old persons were treated in an abusive way by using the police to subjugate a seventy year old woman.
- 39. There is an aspect to the mental health paradigm in locking people away that harms society in general. Could the Royal Commission recommend a more stringent filter as to who 'really' needs to be removed and isolated from society on mental health grounds?
- 40. What is the disability that has and whatever it is, it does not warrant locking her away.
- 41.In order for me to cope as a visited to the geriatric ward of hospital and the psychiatric ward of I had to shut down, imagine what is having to do to survive.
- 42. has been shut away as a result of health services over reaching their authority that has placed wellbeing at risk.
- 43.Chain of events from 2016 to 2019 are very important and historically operation in 2016 was unsuccessful and underpins all hospital appointment thereafter. I can remember visiting in 2016 after the operation and how she hoped she could resume a normal life again. I believe spent over \$13,000 on the operation.
- 44. The operation was not successful and all her efforts in going back to Hospital has since been used by the medical profession to present her as mad. What if she is correct and it will take a second operation to correct the first operation.
- 45.If it is 'just' pelvic floor exercises and a pain management lifestyle that is needed with first weening her off existing pain and laxative medication then how about an outpatient plan with proper dignified community support rather than this cruel inhuman lock her away approach.
- 46.I am supporting ask questions about the 2016 operation and what is really needed to address the pain she is experiencing.
- 47. as well and has witnessed the unjust isolation and mistreatment of
- 48. and I are the only two who have acted in respect of wishes and values.



### My Story:

eviction.

•
58.I believe I need to give my story also to the RC as I have been fighting for my home
and person from abuses that has been so severe that it has almost cost me my life.
59.My social landlord , have tried to place
me under guardianship with the intent to control also.
60.When my Doctor provided clear communications to the organisation
that to place me under guardianship was unwarranted and amounted to legal moves
upon me, the organisation still persisted and in 2015 the manage
attempted to make an account be conditional to being placed
under an administrator. On that occasion VCAT was conscionable and
stated to the manager 'that was not what I meant'. This put an end to

and I had the same VCAT member. I asked for injunction relief and instead of granting me protection and prohibiting from causing further harm used against me the very word that my Doctor used to establish that I was presenting facts and not fiction.

using that tactic to discredit my competency however I have not been able to stop

the granisation from financially abusing me and using VCAT to force an

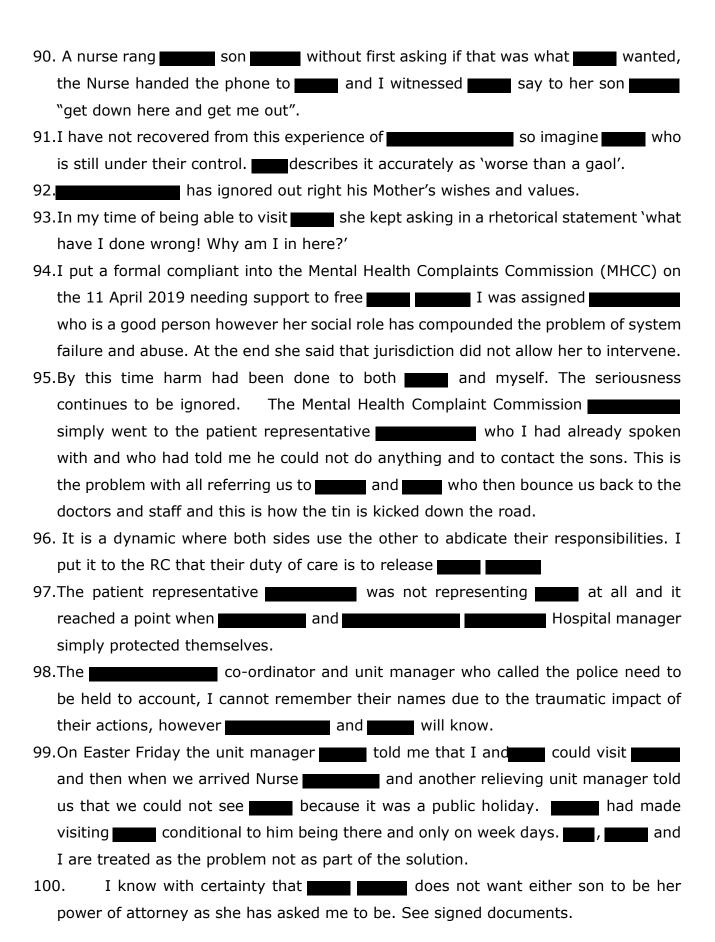
- 62.VCAT denied me a restraining order on when I was presenting to the Tribunal factual evidence as to satisfactories and satisfactories.
- 63. This is what so many vulnerable women are up against. When I appealed to the Supreme Court in 2016 I met another woman who was also left more vulnerable as a result of straightful st

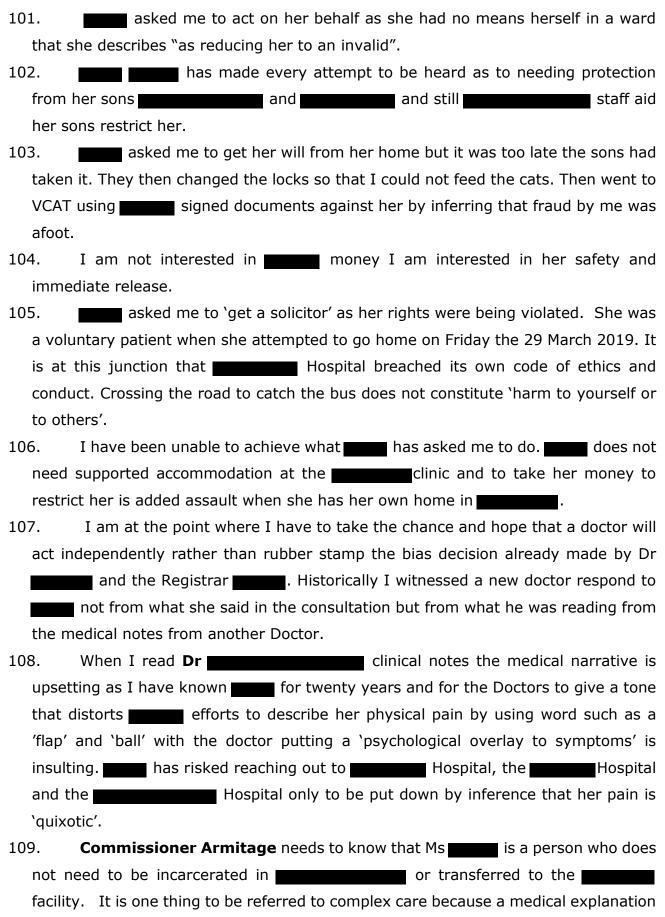
# **Systemic failure to protect:**

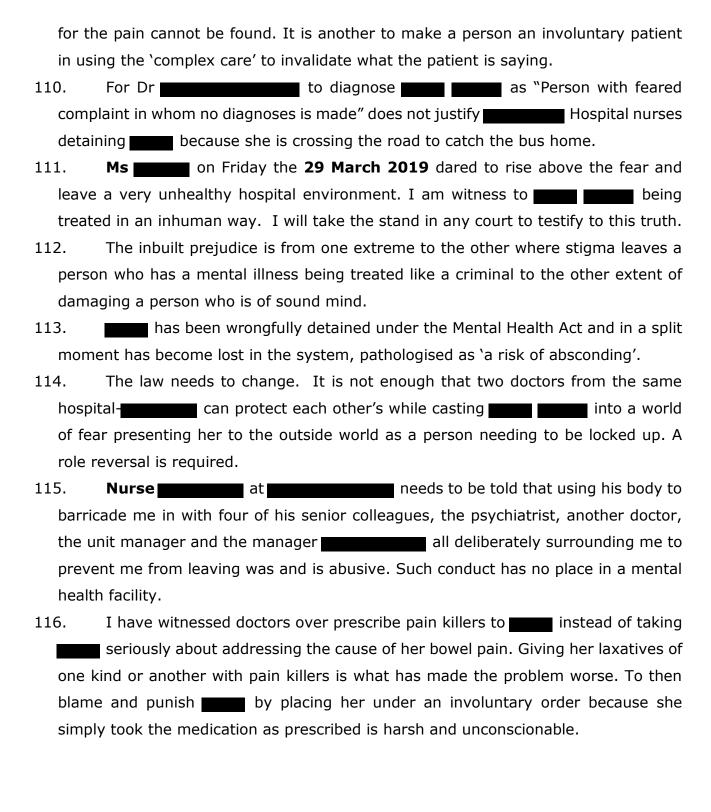
64.It is still true what <b>MP</b> said when campaigned for the Royal
Commission into Family violence that 'the legal system fails victims'. It is still true
what the State Premier Daniel Andrews said that 'it is politicians that let victims
down'. I reached out to the Premier Daniel Andrews and my neighbour also reached
out to him in starting a petition 'Please Daniel Andrews keep safe from a
retaliatory eviction'. My matter was referred to who referred me to
the Finance Minister who sent it down the chain to his assistant
who took it full circle back to the Housing Registrar manager
who has known of harming me since his involvement dating back to 2013 when
Dr reached out to the then Assistant Treasurer and the
Attorney General . The systemic failures that I face are a result of the
Housing Registrar failing to regulate has actively condoned
's financial and administrative abuse. This has meant that I have had to appeal
again to the Supreme Court to protect myself when VCAT granted a possession
order in 2016 when in receipt of medical communications that I was unfit to attend.
65.Too many vulnerable women are chewed up and spat out by the system.
66.What and and are doing to are and my-self is harmful
to society in general. Gate keepers have failed us at the administrative legal and
political level.
67.If you have media mileage you are protected if you are in the bottom 10% of society
you are forgotten and having wealth does not protect you from a broken system. The
11 questions asked by the Royal Commission into Mental Health are extremely
challenging to answer and if and I can give verbal testimony then that
would be very helpful.
68. Mental Health concerns the entire population as mental illness is indiscriminate.
69. now has the experience of being abused by an institution when
Hospital should have enhanced her wellbeing. For a hospital and a social
housing program to compromise our mental health is a social concern that needs
fixing not ignoring.
70. Senior administrators, bureaucrats, politicians and legal representative need to step
up in safe guarding us. Our protection rights are not enforced. The Mental Health
Act has too many loop holes and is too rigid in other areas. For the it is family bias
for others abuse of power and poverty.

71.Can a RC recommendation be put forward to widen the parameters to allow friends
to have credence on a legal level?
72.Ironically I do not believe all family members would agree with the decision
that has made. I do not know if two brothers,
have been informed as to their sister's plight.
73. Victims need to be believed, both and I thought our homes were secure.
working all her life as a high functioning business woman to buy her home.
74.I have contributed for years to a 'pay it forward' voluntary work housing program
with a social contract of 'More Than Just Housing'. The program's core
tenet is meant to be security of tenure for low income Victorians. We all know what
homelessness does to mental health. I have been a member for almost
30 years and the last decade has been a life threatening struggle in protecting my
home and person because of the disproportionate power has over me as a social landlord.
75.I now suffer Complex Post Traumatic Stress Injury as a direct result of the governing
CEHL board ignoring medical evidence that their decisions and actions have been
injurious to me.
76. Could the Royal Commission into Mental Health recommend that housing be a human
right?
77.To witness and experience my friend also be abused on this level of home and
person is added trauma for me.
78.I can easily imagine the powerlessness that is experiencing.
79 and I have best interest at heart. We know that there is no need for
to be an inpatient. competency and sanity has been maligned.
80.On the <b>27 June 2019</b> rang me most upset telling me that he had
gone to visit and on arrival at the unit manager made
him wait in the foyer while he went and rang son
returned and told that had said that he could not visit
could not understand and sent a text message to asking why can I
not visit your Mother? He also rang the younger son the following day
only to be told that said that he could not visit because I was with him.
Again I was blamed and again it was untrue.
81. To be used by her sons to deny a visit from her friend says it all.
82.I have stayed far away from as a result of

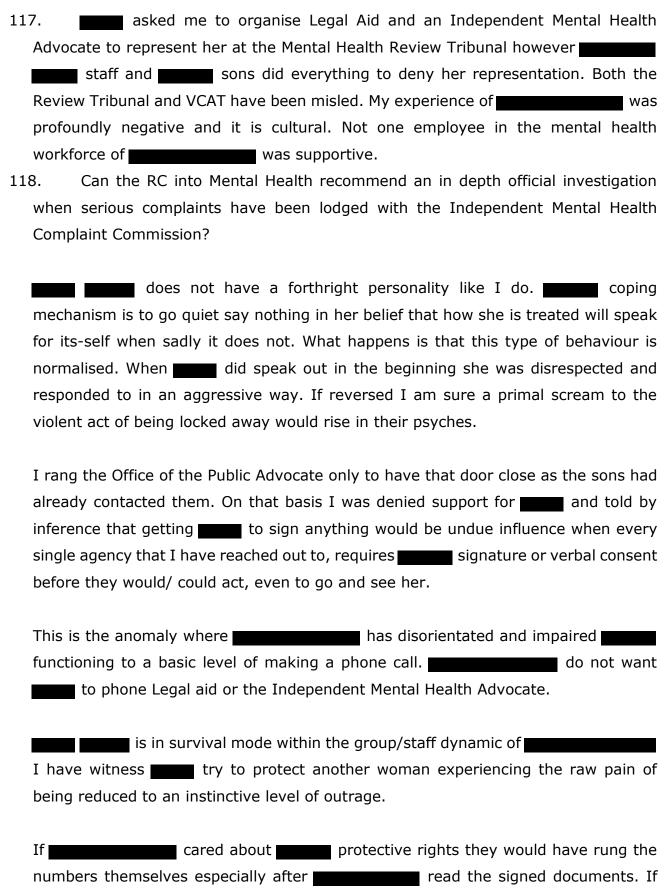
a. The unit co-ordinator and staff use their work position to
threaten me by calling the police with the policeman saying that he would come
to my home and charge me if I did not delete the evidence from my camera
as I had taken a video of exactly how many staff had
descended and surrounded and I when the unit co-ordinator, Sue
called a code black on Sunday 31 March 2019; and
b. I have not wanted to risk being further sanctioned by her sons or
staff because of association when my association with
is of unquestionable integrity in acting according to her wishes and values
83.To deny and an
this time. I am referring to the unit manager who if he cannot
oversee a visit by an eighty year old and seventy year old then where in
soothing culture of a psychiatric ward?
84. sons have used me to secure a VCAT Order that
amounts to violence upon
$85. When \ I$ was 12 years old my Mother went to the police and reported the TRUTH about
my brother being kidnapped. They found it easier to label her mad. I stood there
witness to it all, unable to speak but at 63, I must speak. The police placed my Mother
in where she was subjected to shock treatment and I was taken away and
made a ward of the State.
$86.\mbox{My}$ Mother never recovered and died from a one punch incident when residing in a
derelict boarding room called in . She will remain a cold case
because no one cared.
87. Sometimes 3 degrees of separation can be no separation on a soul level. What is
being done to is not 'duty of care'.
88. Both and I were subjected to unreasonable conduct by in
calling a code black simply because asked the psychiatric nurse why
not allowed to go home. Both and and should be safe to have a serious in
depth conversation instead they were censored.
89. called the police and accused of having a switch blade when it
was his car keys that he moved around in his hand to give him some sort of relief.
behaviour was extreme and harmful to all three of us.







### **Conclusion:**



conscionable he would have made sure that Ms had legal representation at VCAT on the 29 April 2019.

It is a closed system that needs to be opened up to allow friends to be given legal right when family members are being negligent.

These signed documents (see attached) were unethically given to sons by someone from and used at VCAT by and and against their Mother who was not in attendance at the hearing.

On the **26 April 2019** five staff surrounded me and would not allow me to leave unless I handed over the documents. I made sure that authority was respected. If I had been a lawyer or had a lawyer with me then the unit manager on the day (name not known) and hospital manager would not have abused Ms or me in this way.

I said to the unit manager that if I was allowed to go back into the ward and ask what she wanted as the documents were her property and if agreed then it would be fine. The unit manager said "No" and accused me that if we went back inside the ward then I would upset It is the staff that are upsetting not me. I bring comfort in her being heard. The unit manager called the police and I was unable to leave subject to this threat. It was unacceptable behaviour by towards me and

Because did not have a proper Mental Health Tribunal Hearing in April 2019 it is doubly important that her authorised documents reach some agency who can help her legally.

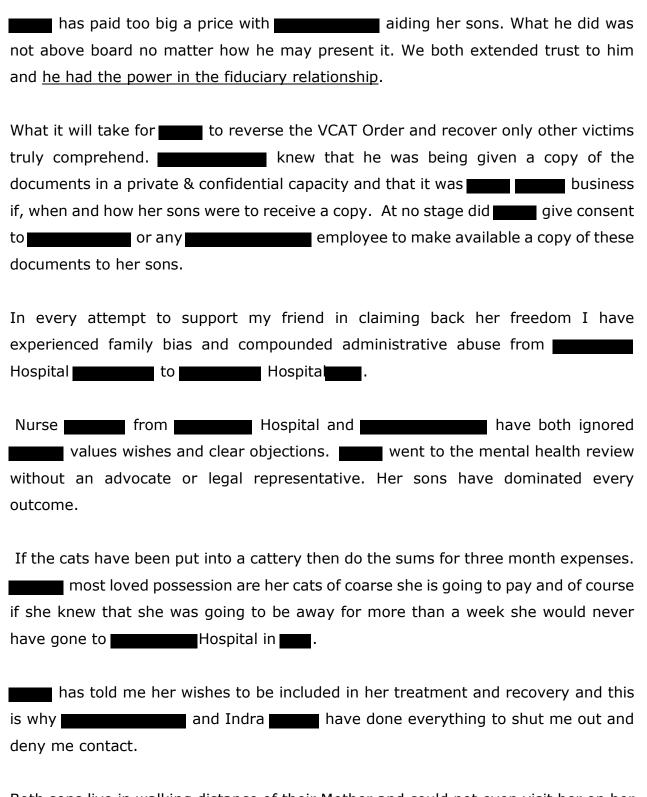
As a Victorian citizen I am asking the Royal Commission to make recommendations to prevent such abuse by hospital staff using the police to intimidate and threaten. On the second occasion I attempted to ring legal aid only to have a recorded prompts direct me elsewhere that had a recorded message as well with no one available.

I then attempted to leave only to have Nurse take up
his barricading position at the front door. The manager again condoned
s abuse in preventing me from leaving. I repeated to what
I had said to the unit manager and this time common sense prevailed and he agreed
to go back into the ward and ask herself. We went into the bedroom
for privacy and after heard that I would not be allowed to leave and that the
police had been called she allow to read and take a copy of her
documents that I had prepared on her behalf. We talked with
thought we were being respected, only for trust to be betrayed by
making the document available to sons.
is an intelligent man and at no time informed either or myself
that he was going to place the document into her file making them available to any
staff who decided to give them to the sons. At 10.30 pm that night
I had the youngest sons ring me making a threat that if I was to change
the locks according to the documents then it would be a criminal matter. I replied
that it was already a criminal matter with him and changing the locks without
their Mother's permission.
was more concerned about intimidating me and he said that he would send the
police to my place.
told me that she broke down at the Mental Health Review Tribunal when the
sons wanted the cats to be placed elsewhere with her expected to pay. When I asked
Indra where the cats were he would not tell me. His Mother had arranged for me to
look after her cats.
To change the locks to prevent me from feeding cats was mean. To this day
I do not know if the oldest cat, Jemma is still alive. Locking and her cats away
is horrible when they need to be together at home with a genuine support person
routinely dropping in. If either of the sons have the cats what is so difficult in them
simply telling me?
On 13 May 2019 I asked who from gave the
document to seems some? He said that it was not him but he would not tell

me who it was. I made clear to him that harm was occurring and once I said this he refused to talk with me and hung up.

This is the system abuse where cover up has become part and parcel of disempowering The more I followed proper legal procedure in seeking to action instructions the more and I were taken out of the equation by those in positions of power. has had no chance whatsoever to stop the unfolding chain of events and the genesis stems back to Hospital sending Nurse who arbitrarily interfered with home, health and person. On Monday the 18 March 2019 came to home while I was on the phone following up on last appointment with Dr only to have Nurse interfere telling me it had all been sorted out and that would be going into hospital for and I were misled. We thought at long last the hospital was hearing concerns and the observations were to do with a possible 2<sup>nd</sup> bowel operation. The deception was there on that day from Nurse who did not tell that she was going in for a geriatric assessment but talked in non-descript vague terms of 'maybe more than one day maybe three or four days', not months. I experienced nurse disrespecting and myself and told her that was the bench mark in how I was to be included. Nurse was bypassing me contrary to Dr respectful inclusion as a support person to Persons involved must be named as has been reduced to being at their mercy. I told and and that I would be reporting it to the Royal Commission. I am doing so to prevent them taking advantage of another vulnerable woman. Can the Royal Commission make 'accountability' transparent to counter the administrative power games that and I are being subjected to? How can we move forward in mental health if we have our mental health assaulted in the

process?



Both sons live in walking distance of their Mother and could not even visit her on her birthday yet make every effort to have control over their Mother's utilities and property has been no effort. came to my place for her birthday.

Both and my story involves a merging of the systems failing vulnerable women who as a result are being subject to elder abuse "the tribunal is satisfied that the person has a disability and is unable to make reasonable decisions..." yet was able to make a 'reasonable decision' in granting a copy of the documents on Friday the **26 April 2019**.

I have experiencing sound capacity in the face of her physical pain. She went to hospital complaining of pain from a previous surgery, doctor didn't listen and focused on her memory problem which is minor in the scheme of things. If you were listening you could hear that wanted engagement with life and for people to celebrate it with her.

To subject to mental and emotional anguish is derelict conduct by persons having power over her. is not a risk to herself or anyone and can manage her own estate and like all of us as we get older we need physical support not locked away. Like needing a village to bring up our children we need a community to care as we age and if we are to have mental health then society needs to cease doing crazy things that leave people demented. Knit one pearl one drop one start again. It was insightful and touching moment watching lovingly respond to another woman in who was pounding on the glass door to get out. The staff too cut off too afraid to humanly engage. What is her story if only I was allowed to visit I could ask. Perhaps can tell me when she comes home.

Yours sincerely,

### Summary

#### **Issues:**

- The system is appalling failing to protect vulnerable women
- There's a doubling with situation and my situation: Member from VCAT did not even acknowledge in her order that was not present, and listened only to the biased opinions of her two sons and the manager of the tribunal is satisfied that the person has a disability and is unable to make reasonable decisions..." yet was able to make a reasonable decision in granting a copy of the signed documents.
- can manage her own \$3 million estate, I have tested her memory myself.
- VCAT has allowed her sons to take away her skills and decision making power.
- She went to hospital complaining of pain from a previous surgery, doctor didn't listen and eventually considered she had a focused on her memory problem.

  Nurse organised an in-home visit for a dementia (?) assessment alone, I haven't been able to find out what sort of test they did.
- Yes, I acknowledge she has a memory problem and most people do, her memory problem is small in comparison to dementia and is a result of her physical pain dominating her daily life. I know much younger people who cannot remember things.
- She doesn't belong in
- Another visit was arranged but because I was there on that occasion son cancelled it, and this led to her son organising another meeting with and nurse, and sked me to be present this was the week before she went into the geriatric ward in Kew. At this time we were misled to believing it was for observation for a few days to prepare for a possible 2<sup>nd</sup> bowel operation.

- gives me instructions that are blocked by her sons and now I can't visit or speak to her without her sons or the staff preventing this.
- can't even get pen & paper, or keep her mobile on her its isolation on top of isolation.
- They are breaching duty of care in the name of duty of care!
- Doctors tell us to contact the sons, and the sons say it's the doctor's decision, we are left powerless.
- We need action. We are caught in an absolutely strangulating system of abuse.
- We're hitting a wall and another wall, and all we want to do is get her out, to see our friend.
- She is straight-jacketed psychological, administratively and legally.

### Key messages:

- There is no system in place to protect vulnerable women from elder abuse via 1. Families and 2. the mental health system
- She is so straight-jacketed psychological and administratively abused.
- sons are taking advantage of her assets and do not have her best interests in mind.
- Lack of ownership of duty of care is the systemic failure
- We need action: The RC must make recommendations so that this cannot continue or happen to another vulnerable woman.
- My mother was locked away after reporting the abuse that was happening to me and my sibling's brother and I will not allow it to happen again.
- It's an inter-generational system failure/abuse.
- and I are all left powerless within a broken system.
- isn't even able to participate in this process of the RC. This is unjust.